FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

TICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPI	ROVAL
OMB Number:	3235-0076
Expíres:	May 31, 2005
Estimated avera	ge burden
nours per respon	16.00

SEC	SEC USE ONLY								
Prefix		Serial							
	]								
DA	TE RECEIV	ED							

CHIFORM LIMITED OFFERING EXEMITION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULO Type of Filing: New Filing Amendment	E
	1991 1988 1111 58151 81151 BLILL BELEE 11515 11155 11156 1
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	04039930
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	04059950
CRE 400 Centennial LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Teleph	one Number (Including Area Code)
	442-4447
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telepi (if different from Executive Offices)  Same	hone Number (Including Area Code)
Brief Description of Business	PROCESSED
Buy and lease of commercial office building.	AUG 1 0 2004
Type of Business Organization	TO TO TO TO THE
corporation   limited partnership, already formed   XX other (please spec   business trust   limited partnership, to be formed   Limited Liabi	LOUVISON .
Actual or Estimated Date of Incorporation or Organization:     Month Year	
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENT	IFICATION DATA		· · · · · · · · · · · · · · · · · · ·		
Enter the information requested for the following:					
Each promoter of the issuer, if the issuer has been organized within	the past five years;				
Each beneficial owner having the power to vote or dispose, or direct to	he vote or disposition	of, 10% or more	of a clas	ss of equity securities of th	ne issuer.
Each executive officer and director of corporate issuers and of corp	orate general and ma	naging partners of	of partne	ership issuers; and	
• Each general and managing partner of partnership issuers.					
Check Box(es) that Apply: X Promoter X Beneficial Owner	Executive Officer	Director		General and/or Managing Partner	·
Crestone Capital Advisors LLC Full Name (Last name first, if individual)					<del></del>
	00202				
1050 Walnut Street, Ste. 402, Boulder, Co Business or Residence Address (Number and Street, City, State, Zip Code)	80302	·			
Eric J. Kramer, Michael J. Sherman, Dougla	s Bonnette,	Laura S.	Hund	lley,Prinčipal	Owner
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	[X]		
			قشا	Managing Partner	
Crestone Real Estate LLC Full Name (Last name first, if individual)					
1050 Walnut Street, Ste. 402, Boulder, CO	80302				
Business or Residence Address (Number and Street, City, State, Zip Code)	·····				
Same					
Check Box(es) that Apply: Promoter 🔀 Beneficial Owner	Executive Officer	Director		General and/or Managing Partner	
Full Name (Last name first, if individual)					
Crestone RE Equity Partners LLC					
Business or Residence Address (Number and Street, City, State, Zip Code)	-				
1050 Walnut Street, Ste. 402, Boulder, CO	80302				
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	X	General and/or Managing Partner	
Full Name (Last name first, if individual)					
Eric J. Kramer					
Business or Residence Address (Number and Street, City, State, Zip Code)	0000				
1050 Walnut Street, Ste. 402, Boulder, CO	80302				
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director		General and/or Managing Partner	
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director		General and/or	
Full Name (Last name first, if individual)				Managing Partner	
run ivanie (Last name 1881, il muividual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director		General and/or Managing Partner	
Full Name (Last name first, if individual)					
					. <u></u>
Business or Residence Address (Number and Street, City, State, Zip Code)	-				

				В. 1	NFORMAT	ION ABOU	T OFFER	ING					
1 11			, ,		11	1:. 1	. , ,	.1: 00	. 0		Yes	No	_
l. Has t	he issuer sol	a, or does t			·				_		🔲		
2. What	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?									\$ 10	,000.00	I	
											Yes	No	
	the offering												
comn If a pe or sta	the informanission or sin erson to be li tes, list the n ker or dealer	nilar remune sted is an as ame of the b	eration for s sociated po broker or d	solicitation erson or ag ealer. If m	of purchas ent of a brol ore than fiv	ers in conn ker or deald e (5) perso	ection wit or registere ns to be lis	h sales of seed with the State are asso y. Cresto	curities in t SEC and/or ociated pers One Sec	the offering with a state sons of successions of successions.	g. te ch		
	(Last name							placer	ment ag	ent fo	r the	offeri	ng, but
	ne Secu								not rec Tremu			mmissio	n or
	or Residence							2111111	ı rem	inerat.	ton.		
	Valnut S Associated B			JZ, BOU	ilder, (	30 803	302						
	ne Secu												
States in V	Which Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers							_
(Chec	ck "All State	s" or check	individua	l States)		•						ll States	
AL IL MT	AK IN NE SSC	IA NV SD	AR KS NH TN	KY KY XXV TX	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
N/A	c (Last name	·		d Street, C	City, State,	Zip Code)							_
	Associated B	roker or De	aler					· · ·	·	***************************************			
N/A													_
States in V	Which Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	1						_
(Chec	k "All State	s" or check	individual	States)			•••••					II States	
AL IL MT	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Full Name	: (Last name	first, if ind	ividual)							<u>.</u>	<u> </u>		- <del></del>
Business N/A	or Residence	e Address (	Number an	d Street, C	City, State,	Zip Code)				·····			_
Name of A	Associated B	roker or De	aler				,			· <del></del>			
States in V	Vhich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers							_
(Chec	k "All State	s" or check	individual	States)			•••••					II States	
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	C		
	Type of Security	Aggre Offerin		Amount Already Sold
	Debt	s <u>-0</u>		\$ <u>-0-</u>
	Equity	\$	_	\$ <u></u> -0-
	Common Preferred			
	Convertible Securities (including warrants)	\$ <u>-0</u>		\$0-
	Partnership Interests	\$0	_	s0 <del>-</del>
	Other (Specify Limited LiabilityCompany,MembershipInterests	\$2,60	0,000	<b>2,350,000</b>
	Total			
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:	her	Aggregate Dollar Amount
		Inves		of Purchases
	Accredited Investors	26		\$2,350,000
	Non-accredited Investors			sO-
	Total (for filings under Rule 504 only)	^		s0-
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type Secui		Dollar Amount Sold
	Rule 505			\$0-
	Regulation A			\$ <u>-0-</u>
	Rule 504			<u> </u>
	Total			\$0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		. 🗆	\$
	Printing and Engraving Costs			\$ <u>-</u> 0-
	Legal Fees		. 🗆	\$35,000
	Accounting Fees		. $\Box$	\$ <u></u> -0-
	Engineering Fees		. 🗆	ş <u>-0-</u>
	Sales Commissions (specify finders' fees separately)			\$ 35,000
	Other Expenses (identify)			\$ <u>-0-</u>
	Total			\$ 350000

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENS	SES AND USE OF PROCEEDS	
and total expense	es furnished in response to Part	offering price given in response to Pa C — Question 4.a. This difference is	the "adjusted gross	\$ <u>2,315,000</u>
each of the purp check the box to	poses shown. If the amount f the left of the estimate. The to	ss proceed to the issuer used or proportion any purpose is not known, furnishial of the payments listed must equal of Part C — Question 4.b above.	sh an estimate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
Purchase of real	estate		s <u>-0-</u>	[]\$1,930,00
	or leasing and installation of	f machinery	\$ -0-	
		d facilities		_
offering that ma issuer pursuant	y be used in exchange for the to a merger)	e value of securities involved in thi e assets or securities of another		
			<del></del>	_
			<del></del>	
Other (specify)				
Column Totals.			\$ <u>35,000</u>	\$ <u>1,930,00</u>
Total Payments	Listed (column totals added)		\$2,	315,000
		D. FEDERAL SIGNATUR	RE	
signature constitutes	an undertaking by the issuer t	by the undersigned duly authorized pot to furnish to the U.S. Securities and n-accredited investor pursuant to pa	Exchange Commission, upon writte	
Ssuer (Print or Type	2)	Signature	Date	
CRE 400 Cente	ennial LLC	en so	7/26/04	1
Name of Signer (Prin	nt or Type)	Title of Sign (Print or Type		
Eric J. Krame		,,	ne Real Estate LLC,the	

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification  Yes No provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned thorized person.
Issuer (	Print or Type) Signature Date
CRE 4	400 Centennial LLC 7/26/09

Manager of Crestone Real Estate LLC, Manager of Issuer

Instruction:

Name (Print or Type)
Eric J. Kramer

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1					AF	PPENDIX				
State   Yes   No	1	Intend to non-a investor	I to sell accredited as in State	Type of security and aggregate offering price offered in state		amount pu	investor and rchased in State		Disqua under St (if yes, explan waiver	lification ate ULOE attach ation of granted)
AK AZ AR CA XX 175,000 3 \$175,000 -00- CO XX 2,045,000 21 \$2,045,000 -00- CT DE DC FL GA HI ID II	State	Yes	No		Accredited	Amount	Non-Accredited	Amount	Yes	No
AZ	AL									
AR	AK									
CA     XX     175,000     3     \$175,000     -0-     -0-       CO     XX     2,045,000     21     \$2,045,000     -0-     -0-       CT     DE     -0-     -0-     -0-     -0-       DC     FL     -0-     -0-     -0-     -0-       FL     GA     -0-     -0-     -0-     -0-       GA     -0-     -0-     -0-     -0-     -0-       FL     -0-     -0-     -0-     -0-     -0-     -0-       FL     -0-     -0-     -0-     -0-     -0-     -0-     -0-       FL     -0-     -0-     -0-     -0-     -0-     -0-     -0-     -0-       II     -0- <t< td=""><td>AZ</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	AZ									
CO	AR				* *					
CT	CA		XX	175,000	3	\$175,000	-0-	-0-		
DE	со		XX	2,045,000	21 \$	2,045,00	0 -0-	-0-		
DC       FL         FL       ID         GA       ID         IIL       ID         IN       ID         IA       IA         KS       ID         KY       ID         IA       ID <td>CT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	CT									
FL GA	DE									
GA       HI	DC									
HI	FL									
IL										
IL         IN           IN         IA           IA         IA           KS         IA           KY         IA           LA         IA           ME         IA           MD         IA           MA         IA           MI         IA           MN         IA	ļ——— <del> </del>									
IN										
IA										
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ME	<del></del>									
MD	<del>                                     </del>									
MA MI MN										
MI MN										
MN										
MS	MN									
1 <sup>7</sup> LO	MS									

APPENDIX										
1	Intend to non-a	2 I to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		under St (if yes, explan waiver	lification ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No	LLC Membershi	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
MT										
NE										
NV	·····									
NH										
NJ		XX	100,000	1	\$100,000	-0-	-0-			
NM										
NY							<u>-</u> -			
NC										
ND										
ОН										
ОК	<del></del>									
OR										
PA										
RI										
SC		XX	300000	1	\$30,000	-0-	-0-			
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV	<del></del>									
WI										

				APP	ENDIX				-
Intend to sell and aggregate offering price investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State WY	Yes	No No	(Part C-Item 1)  LLC Member- ship interest	Number of Accredited Investors	Amount	C-Item 2)  Number of Non-Accredited Investors	Amount	Yes	No No
PR									